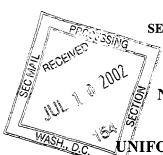
FORM D



UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR FORM LIMITED OFFERING EXEMPTION

OMB /	4PPR	OVAL
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OMB Number: 3235-0076

Expires: November 30, 2001 Estimated average burden hours per form 16.00

SEC USE ONLY						
Prefix		Serial				
DA	TE RECEIV	ED				

Name of Offering (check if this is an amendment and name has changed, and indicate cha	ange.) 111499
Series C Preferred Stock	1127/75_
Filing Under (Check box(es) that apply): ☐ Rule 504 ☐ Rule 505 ☒ F	Rule 506
Type of Filing: New Filing	
A. BASIC IDENTIFICATION DAT	r A
Enter the information requested about the issuer	
Name of Issuer (check if this is an amendment and name has changed, and indicate changed	ange.)
Alopa Networks, Inc.	
• • • • • • • • • • • • • • • • • • • •	Telephone Number (Including Area Code)
	(408) 331-1750
Address of Principal Business Operations (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
(if different from Executive Offices)	
Brief Description of Business	
Provide subscriber service solutions for broadband access networks.	
Type of Business Organization	- -
☑ corporation ☐ limited partnership, already formed	□ other (please specify 02048485
□ business trust □ limited partnership, to be formed	
Month Ye	ear
Actual or Estimated Date of Incorporation or Organization: 09	9 🗷 Actual 🗆 Estimated
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviati	
	DE /:
CN for Canada; FN for other foreign jurisdiction)	DE (\ 2 3 2002
GENERAL INSTRUCTIONS	•
D. L L.	THOMSON

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), The CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION-

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.



A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and

 Each general and managing partner of partner 	tnership issuers.			
Check Box(es) that Apply: □ Promoter	☐ Beneficial Owner	■ Executive Officer	■ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)				
Bhalerao, Prakash				
Business or Residence Address (Number and	Street, City, State, Zip Code)			
Rainbow Enterprises, LP; 21690 Rainb	ow Court; Cupertino, CA	95014		
Check Box(es) that Apply: ☐ Promoter	■ Beneficial Owner	■ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)				
Verma, Vijaya				
Business or Residence Address (Number and	Street, City, State, Zip Code)	***		
Along Noticedia DVT Ltd. 50 Versi Vila	- Danda Danaslana 500 00	A to all a		
Alopa Networks PVT Ltd., 50 Vani Vilas Check Box(es) that Apply: Promoter			☐ Director	☐ General and/or
Check Box(es) that Apply: D Promoter	■ Beneficial Owner	☐ Executive Officer	□ Director	Managing Partner
Full Name (Last name first, if individual)	, <u>, , , , , , , , , , , , , , , , , , </u>			
Rainbow Enterprises, LP				
Business or Residence Address (Number and	Street, City, State, Zip Code)			
04000 5 : 1	25044			
21690 Rainbow Court; Cupertino, CA				
Check Box(es) that Apply: ☐ Promoter	■ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)		0 1-0/	/ 2	0 / 0/
Wipro, Inc.		10 lo of a	cla466 -	of Common
Business or Residence Address (Number and	Street, City, State, Zip Code)			of wanton
				•
1995 El Camino Real, Ste. 200; Santa C		<u> </u>		
Check Box(es) that Apply: ☐ Promoter	E Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)				
Summit Accelerator Fund, L.P.				
Business or Residence Address (Number and	Street, City, State, Zip Code)			
499 Hamilton Avenue, Ste. 200; Palo A				5 6 1 1/
Check Box(es) that Apply: ☐ Promoter	■ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)				
Lucent Venture Partners II LLC				
Business or Residence Address (Number and	Street, City, State, Zip Code)			
3180 Porter Drive, Ste. D; Palo Alto, CA	\ 94304			
	k sheet, or copy and use additi	onal copies of this sheet. as	necessary.)	
(300 01211	,			

A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer:
 - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and

 Each general and managing partner of pa 	artnership issuers.			
Check Box(es) that Apply: ☐ Promoter	☐ Beneficial Owner	Executive Officer	■ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)				
Foley, Michael P.				
Full Name (Last name first, if individual) Foley, Michael P. Business or Residence Address (Number and Street, City, State, Zip Code) c/o Alopa Networks, Inc., 435 Indio Way, Sunnyvale, CA 94085 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/o Managing Par Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) c/o Alopa Networks, Inc., 435 Indio Way, Sunnyvale, CA 94085 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/o Managing Par Full Name (Last name first, if individual) Szalay, Peter Business or Residence Address (Number and Street, City, State, Zip Code) c/o Alopa Networks, Inc., 435 Indio Way, Sunnyvale, CA 94085 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/o Managing Par Full Name (Last name first, if individual) VantagePoint Venture Partners Business or Residence Address (Number and Street, City, State, Zip Code) 1001 Bayhili Drive, Suite 3000, San Bruno, CA 94066 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/o Managing Par Full Name (Last name first, if individual) Hernandez, Manuel Business or Residence Address (Number and Street, City, State, Zip Code) c/o VantagePoint Venture Partners, 1001 Bayhill Drive, Suite 3000, San Bruno, CA 94066 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/o Managing Par General and/o Managing Par				
c/o Alona Networks, Inc., 435 Indio W	av. Sunnyvale. CA 94085			
		Executive Officer	☐ Director	☐ General and/or
			·	Managing Partner
Full Name (Last name first, if individual)				
Burton, M. Christine				
Business or Residence Address (Number and	d Street, City, State, Zip Code)		
c/o Alopa Networks, Inc., 435 Indio Wa	ay, Sunnyvale, CA 94085			
		E Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)	1.0.00	· •••• <u>•</u>		
Szalav. Peter				
	d Street, City, State, Zip Code)		
ole Alena Networks Inc. 425 India Ma	. Communicate CA 04005			
		5 P		5 0 1 1/
Check Box(es) that Apply: Promoter	🗷 Beneficial Owner	Li Executive Officer	☐ Director	Managing Partner
Full Name (Last name first, if individual)			<u> </u>	
VantagePoint Venture Partners				,
	d Street, City, State, Zip Code)		
1001 Payhill Driva Suita 2000 San Br	CA 94066			
		F F	E D:	D C1 1/
Check Box(es) that Apply: Promoter	Li Beneficial Owner	L Executive Officer	E Director	Managing Partner
Full Name (Last name first, if individual)				
Hernandez, Manuel				
Business or Residence Address (Number and	d Street, City, State, Zip Code)		
c/o VantagePoint Venture Partners. 10	001 Bavhill Drive. Suite 30	00. San Bruno. CA 94066	3	
				☐ General and/or
				Managing Partner
Full Name (Last name first, if individual)				
Friend, Marc				
Business or Residence Address (Number and	d Street, City, State, Zip Code)		
c/o Summit Accelerator Fund, 499 Hai	milton Avenue. Ste. 200: F	Palo Alto, CA 94301		
	sheet, or copy and use additio	· .	ecessary.)	

B. INFORMATION ABOUT OFFERING		
		No
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?		X
Answer also in Appendix, Column 2, if filing under ULOE.		
2. What is the minimum investment that will be accepted from any individual?	\$50,000	
3. Does the offering permit joint ownership of a single unit?		No ⊠
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commis-		_
sion or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.		
Full Name (Last name first, if individual)		
Prince Prince All Object Co. Co. Co. Co. Co.		
Business or Residence Address (Number and Street, City, State, Zip Code)		
Name of Associated Broker or Dealer		
Name of Associated Broker of Beater		
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers	- Common of the	—
(Check "All States" or check individual States)	☐ All Star	ites
[AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI]	[ID]	
[IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR]	[MO] [PA]	
	[PR]	
Full Name (Last name first, if individual)	- 	_
Business or Residence Address (Number and Street, City, State, Zip Code)		
Name of Associated Broker or Dealer		
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers		—
(Check "All States" or check individual States)	☐ All Stat	tes
	[ID]	
	[MO]	
	[PA] [PR]	
Full Name (Last name first, if individual)		
Business or Residence Address (Number and Street, City, State, Zip Code)		
	_	
Name of Associated Broker or Dealer		
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers		_
(Check "All States" or check individual States)	☐ All Stat	tes
	[ID] [MO]	
	[PA]	
[RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY]	[PR]	

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering check this box \square and indicate in the columns below the amounts of the securities offered for exchange	•	
	and already exchanged.	Aggregate	Amount Already
	Type of Security	Offering Price	Sold
	Debt	\$	\$
	Equity	\$ <u>12,500,000.41</u>	\$ 8,500,000.37
	□ Common ☑ Preferred		
	Convertible Securities (including warrants)	\$	\$
	Partnership Interests	\$	\$
	Other (Specify)	\$	\$
	Total	\$ <u>12,500,000.41</u>	\$ 8,500,000.37
	Answer also in Appendix, Column 3, if filing under ULOE.		
	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
		Number Investors	Aggregate Dollar Amount Of Purchases
	Accredited Investors		\$ 8,500,000.37
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)	11	\$ 8,500,000.37
	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505	•	\$
	Regulation A		\$
	Rule 504		\$
	Total		\$0
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.	,	
	Transfer Agent's Fees	🗆 \$	
	Printing and Engraving Costs	s	
	Legal Fees	x \$	75,000.00
	Accounting Fees	\$	
	Engineering Fees		
	Sales and Commissions (specify finders' fees separately)		
	Other Expenses (identify)	•	
	Total		

No. 25	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND	USE	OF PROCE	EDS	i i i i i i i i i i i i i i i i i i i	
	b. Enter the difference between the aggregate offering price in response to Part C - Question 1 and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross proceeds to the issuer."			***************************************		\$ 12,425,000.41
5.	Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above.					
			Payments Officers Directors,	&		Payments to
	Salaries and fees	П	Affiliate:		_ \$	Others
	Purchase of real estate		\$			· · · · · · · · · · · · · · · · · · ·
	Purchase, rental or leasing and installation of machinery and equipment	_	\$		_	
	Construction or leasing of plant buildings and facilities		\$			
			<u> </u>			
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)		\$	[ן \$	
	Repayment of indebtedness		\$	[ן \$	
	Working capital		\$		s \$	12,425,000.41
	Other (specify):		\$		\$ ב	
			\$	[\$ כ	
	Column Totals	×	\$		፪ \$	12,425,000.41
	Total Payments Listed (column totals added)		×	\$12,425	,000	<u>).41</u>
4.5	D. FEDERAL SIGNATURE		100	Section 15		
foll	sissuer has duly caused this notice to be signed by the undersigned duly authorized person. If the owing signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Ex st of its staff, the information furnished by the issuer to any non-accredited investor pursuant to pa	chan	ge Commissi	on, upo	n wi	
Issu	ter (Print or Type) Signature		1	Date		
Alc	opa Networks, Inc.		,	July 🗳	. و ا	2002

- ATTENTION -

Secretary

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

Name of Signer (Print or Type)

Stephen B. Thau

1.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes □	No ⊭				
	See Appendix, Column 5, for state response.						
2.	The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice Form D (17 CFR 239.500) at such times as required by state law.	is filed,	a notice on				
3.	The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, informatissuer to offerees.	tion furni	shed by the				
4.	The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.						
	ssuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf signed duly authorized person.	by the					
Issuer	(Print or Type) Signature Date						
Alop	a Networks, Inc. July S	, 2002) -				

Secretary

E. STATE SIGNATURE

Instruction.

Name (Print or Type)

Stephen B. Thau

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX										
1	Intend to non-a investor	I to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)			5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No		Number of Accredited Investors				Yes	No	
AL										
AK										
AZ										
AR										
CA	X		Series C Preferred Stock -\$7,016,667.00	10	\$7,016,667.00				X	
СО										
СТ										
DE										
DC										
FL										
GA										
ні										
ID										
IL										
IN										
IA										
KS										
KY										
LA										
ME										
MD										
MA										
МІ										
MN										
MS										
МО							= <u>-</u>			

A			

1	2	2	3			4			5
	to non-ac	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)			Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
MT									
NE									
NV									-
NH					-	-			
NJ		X	Series C Preferred Stock\$1,483,333.37	1	\$1,483,333.37				Х
NM	-								
NY									
NC									
ND									
ОН									
ок									
OR									
PA									
RI									
SC									
SD									
TN					_				
TX									
UT				_			·		
VT	-								
VA									
WA	·								
wv									
WI									
WY								-	
PR									